

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
 05-11-2001 90003 048 ***150.00

DOCUMENT # P00000068057

1. Entity Name
NATIVE BOAT TOURS, INC.

Principal Place of Business

Mailing Address

**3322 RIVIERA DRIVE
 KEY WEST FL 33040**

**3322 RIVIERA DRIVE
 KEY WEST FL 33040**

2. Principal Place of Business

3. Mailing Address

Blue Lagoon Motel

Suite, Apt. #, etc.

3101 N. Roosevelt Blvd.

Suite, Apt. #, etc.

City & State
Key West, Florida

City & State

4. FEI Number

65-1027357

Applied For

Not Applicable

Zip
33040

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

Name

Edward Gartenmayer

Street Address (P.O. Box Number is Not Acceptable)

3322 Riviera Drive

City

Key West

FL

Zip Code
33040

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Edward Gartenmayer*

Edward Gartenmayer PVD

01-28-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PVD
 GARTENMAYER, EDWARD D
 3322 RIVIERA DRIVE
 KEY WEST FL 33040** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
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 CITY-ST-ZIP
**STD
 GARTENMAYER, COLLEEN L
 3322 RIVIERA DRIVE
 KEY WEST FL 33040** ☐ Delete

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward Gartenmayer* **Edward Gartenmayer**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-29-01 **305-292-1562**
 Date Daytime Phone #

CR2E034 (10/00)